



UNITED STATES DISTRICT COURT, NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION

Plaintiff(s)

Lavenne Handisow

08CV4766

JUDGE LEFKOW

MAGISTRATE JUDGE MASON

v.

FILED

Defendant(s)

COSI

AUG 21 2008

Aug 21, 2008

NF Judge: \_\_\_\_\_

MOTION FOR APPOINTMENT OF COUNSEL

CLERK, U.S. DISTRICT COURT

[NOTE: Failure to complete all items in this form may result in the denial of the motion for appointment of counsel]

- I, Lavenne Handisow, declare that I am the (check appropriate box)  
☒ plaintiff ☐ defendant in the above-entitled proceeding and state that I am unable to afford the services of an attorney, and hereby request the Court to appoint counsel to represent me in this proceeding.
- In support of my motion, I declare that I have made the following attempts to retain counsel to represent me in this proceeding [NOTE: This item *must* be completed]:  
Robert J. Semand 407 South Dearborn St  
3129130625 Chicago, IL 60605
- In further support of my motion, I declare that (check appropriate box):  
☒ I am not currently, nor previously have been, represented by an attorney appointed by the Court in this or any other civil or criminal proceeding before this Court.  
☐ I am currently, or previously have been, represented by an attorney appointed by the Court in the proceeding(s) described on the back of this page.
- In further support of my motion, I declare that (check appropriate box):  
☒ I have attached an original Application for Leave to Proceed *In Forma Pauperis* in the proceeding detailing my financial status.  
☐ I have previously filed an Application for Leave to Proceed *In Forma Pauperis* in this proceeding, and it is a true and correct representation of my financial status.  
☐ I have previously filed an Application for Leave to Proceed *In Forma Pauperis* in this proceeding. However, my financial status has changed and I have attached an Amended Application to Proceed *In Forma Pauperis* to reflect my current financial status.
- I declare under penalty that the foregoing is true and correct.

Movant's Signature

Street Address

Date

City, State, ZIP

8-21-08

107 Devonshire  
Arlene, IL 60417